DEC 4 1998

APPENDIX E

510(k) SUMMARY **AESCULAP-MEDITEC** MULTIPULSE CO2 LASER

This 510(k) summary of safety and effectiveness for the MultiPulse CO₂ laser is submitted in accordance with the requirements of SMDA 1990 and follows Office of Device Evaluation guidance concerning the organization and content of a 510(k) summary.

Applicant:

Aesculap-Meditec

Address:

2525 McGaw Avenue

Irvine, CA 92623-9791

Manufacturer: Aesculap-Meditec-GmbH

Prussingstrasse 41 D-07745 Jena Germany

(011) +49/3641/653223 (011) +49/3641/652121

Contact Person:

Mr. William T. Kelley

Telephone:

949-660-2770

949-660-2760 (Fax)

Preparation Date: September 1998

(of the Summary)

Device Name:

MultiPulse CO₂ laser

Common Name:

CO₂ Laser

Classification

Laser surgical instrument for use in general and plastic surgery and in

Name:

dermatology (see: 21 CFR 878.4810).

Product Code: GEX.

Panel: 79

Legally marketed Medical Laser Technology, Inc. M.L.T. 30

predicate device:

Device description: The Aesculap-Meditec MultiPulse CO₂ laser emits a beam of coherent light

at 10.6 microns.

Indications for:

use:

The Aesculap-Meditec CO₂ Laser is intended for the ablation, vaporization, incision, excision, or cutting of soft tissue in oral surgery, E.N.T., gynecology, and dermatology.

Comparison to

The specifications of and indications for the Aesculap-Meditec MultiPulse CO₂ predicate device: laser are the same as or very similar to those of the claimed predicate, the M.L.T. 30 marketed by Medical Laser Technology, Inc.

Performance Data: None. The specifications and indications for use of the Aesculap-Meditec MultiPulse CO₂ laser are the same or very similar to those of the claimed predicate device.

Because of this, performance data were not required.

CONCLUSION: Based on the similarities of specifications and indications for use, Aesculap-Meditec believes that the MultiPulse CO2 laser described in this notification is substantially equivalent to the cited legally marketed predicate device.



Food and Drug Administration 9200 Corporate Boulevard Rockville MD 20850

DEC 4 1998

Mr. William T. Kelley General Manager Aesculap-Meditec 2525 McGaw Avenue Irvine, California 92623-9791

Re:

K983215

Trade Name: Multipulse CO₂ Laser

Regulatory Class: II
Product Code: GEX
Dated: September 9, 1998
Received: September 14, 1998

Dear Mr. Kelley:

We have reviewed your Section 510(k) notification of intent to market the device referenced above and we have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration.

If your device is classified (see above) into either class II (Special Controls) or class III (Premarket Approval), it may be subject to such additional controls. Existing major regulations affecting your device can be found in the <u>Code of Federal Regulations</u>, Title 21, Parts 800 to 895. A substantially equivalent determination assumes compliance with the current Good Manufacturing Practice requirement, as set forth in the Quality System Regulation (QS) for Medical Devices: General regulation (21 CFR Part 820) and that, through periodic (QS) inspections, the Food and Drug Administration (FDA) will verify such assumptions. Failure to comply with the GMP regulation may result in regulatory action. In addition, FDA may publish further announcements concerning your device in the <u>Federal Register</u>. Please note: this response to your premarket notification submission does not affect any obligation you might have under sections 531 through 542 of the Act for devices under the Electronic Product Radiation Control provisions, or other Federal laws or regulations.

Page 2 - Mr. William T. Kelley

This letter will allow you to begin marketing your device as described in your 510(k) premarket notification. The FDA finding of substantial equivalence of your device to a legally marketed predicate device results in a classification for your device and thus, permits your device to proceed to the market.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801 and additionally 809.10 for <u>in vitro</u> diagnostic devices), please contact the Office of Compliance at (301) 594-4595. Additionally, for questions on the promotion and advertising of your device, please contact the Office of Compliance at (301) 594-4639. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21 CFR 807.97). Other general information on your responsibilities under the Act may be obtained from the Division of Small Manufacturers Assistance at its toll-free number (800) 638-2041 or (301) 443-6597 or at its internet address "http://www.fda.gov/cdrh/dsmamain.html".

Sincerely yours,

Celia M. Witten, Ph.D., M.D.

Director

Division of General and Restorative Devices Office of Device Evaluation Center for Devices and

Center for Devices an Radiological Health

Enclosure

INDICATIONS FOR USE STATEMENT

510(K) Number (if known): <u>K983215</u>
Device Name: <u>Aesculap-Meditec MultiPulse CO₂ laser</u>

Indications For Use St	catement:
The Aesculap-Med and or cutting of s	itec CO_2 laser is intended for the ablation, vaporization, incision, excision of tissue in:
Oral surgery	
Dermatology	
Examples:	Removal of small skin tumors, superficial pigmented lesions, adeno- sebaceous hypertrophy, treatment of scars, skin tags, etc. Skin resurfacing (scanning mode) Blepharoplasty
E.N.T.	
Examples:	Tumor surgery of the larynx and pharynx LAUP Stenosis
CAUTION	Patients should be diagnosed with tissue problems to exclude those whose problems are caused by being overweight or to drinking problems.
	Remind patients that there may be vocalization problems after laser surgery.
Gynaecology	
The examples a general guide	are not intended to be exhaustive or complete but to serve as a to the surgeon.
	poses that the MultiPulse CO ₂ laser be limited to prescription use. This in the final printing of the manual and on literature relating to the device.
(PLEASE DO NOT	WRITE BELOW THIS LINE - CONTINUE ON ANOTHER PAGE IF NEEDED)
Concurrence of CDRH	I, Office of Device Evaluation (OFFICE OF DEVICE EVALUATION)
Prescription Use (Per 21 CFR 801.109)	OR _ Over-The-Counter Use
(Per 21 CFR 801.109)	$\mathcal{L}(\mathcal{O}(0))/\mathcal{D}$
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	Division of General Restorative Devices K9832
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